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### For use by Members, officers, and employees

Form A

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against anyone who files more than 30 days late. A \$200 penalty shall be assessed

## PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Report Type

Filer Status

House of Representatives Annual (May 15, 2013)

District:

Amendment

State: Colors

Officer or Employee

**Employing Office** 

Termination

ermination Date:

Daytime Telephone:

Member of the U.S.

Name:

**CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT** 

**UNITED STATES HOUSE OF REPRESENTATIVES** 

the onse.	ered and 'es" respo	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	Yes No	Yes	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  If yes, complete and attach Schedule V.
No No	Yes	No X IX. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.	No No	Yes	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?  If yes, complete and attach Schedule IV.
N <sub>0</sub>	Yes	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?  If yes, complete and attach Schedule VIII.	Yes No	Yes	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
No K	Yes	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)?  If yes, complete and attach Schedule VII.	₹   <u>X</u>	Yes	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?  If yes, complete and attach Schedule II.
S S	Yes	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?  If yes, complete and attach Schedule VI.	Yes No	¥g ⊠	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?  If yes, complete and attach Schedule I.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?

**TRUSTS**—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes

No X

Yes

**8** ∑

Yes

8 X

they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics

**EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because

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Page 2 of

### SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	fits received under the Social Sec	curity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee Legislative Pension	\$6,000 \$9,000
Examples: Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 NA
Colorado Public Enla es Consenent Ham	Pasies	*SS.546.8
of Colo	Sacus Shore	N/31/21 99
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# SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green enve-List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization lope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
	Association of American Associations, Washington, DC	Speech	Feb. 2, 2012	\$2,000
Examples:	XYZ Magazine	Article	Aug. 13, 2012	\$500
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o Great west Stable	X TIAA CREF	Invesco Charter Fund	Frank his Mutual Beacon	Arbican Cop world	Can Stock Funds Las	ァ ろ	Examples:	SP, SP Mega Corp. Stock	tion in Block A.  Exclude: Your personal residence, including second homes and vacation homes ( <i>unless</i> there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic loca-	For rental or other real property held for investment, pro- vide a complete address or a description, e.g., "rental or property" and a city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	me Source	BLOCK A
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×	×		<u> </u>		×	L		×	\$50,001 - \$100,000		_	* This column is for assets held solely by your spouse or dependent child.		Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.	Value of Asset	_
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				<u> </u>		<b></b>			Spouse/DC Asset over \$1,000,000*	Σ.		your	orting year generated	of reporting of other than the method		
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					<u> </u>			×	DIVIDENDS		reporting period	vested, must income. Check generated no	IRAs), you may c Deferred" column. D est, and capital gai	Check all columns retirement accoun allow you to choose ments or that gener income (such as a		
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						×			INTEREST		§	must be Check "No d no inco		all column  ont account  on to choose  that general	Type of I	奥
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			•				Royalties		Other Type of Income		l	vested, must be disclosed as income. Check "None" if the asset generated no income during the	IRAs), you may check the "Tax- Deferred" column. Dividends, inter- est, and capital gains, even if rein-	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or	•	ı
							ties		(Specify: e.g., Partnership Income or Farm Income	e)		as sset the	e e e	not rred or	I	
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						H			\$1,000,001 – \$5,000,000	<del>`</del>		This column is for income generated seets held solely by your spouse	and capital gains, even if reinvested be disclosed as income. Check "I no income was earned or generated."	ecke / ch ets, necki	•	
				1		t			Over \$5,000,000	<u>×</u>	$\dashv$	ated use	and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	For assets for which you checked "lax- Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. <b>Dividends, interest</b> ,	Ì	ŀ
			<b>†</b>		<b>1</b>	1			Spouse/DC Income over \$1,000,000*	<u>_</u> ≚	$\dashv$	ð À	";" it	the the	•	
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	S (partial)	indicate as follows: (S) (partial) See below for example.  P, S, E		If only a	•	\$1,000 in reporting year.	asset had purchases (P), sales (S), or exchanges (E) exceeding	Transaction Indicate if the	BLOCK E

For additional assets and unearned income, use next page,

This page may be copled if more space is required.

																			٦	SP, DC, JT		လ္ရ <b>S</b>
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	┾-	_		<b>-</b>	<u> </u>		$\vdash$	+-			-	_	-	-				+	-	Spouse/DC income over \$1,000,000* ≧	<del>                                     </del>	-    @
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### SCHEDULE IV— TRANSACTIONS

Name

SP, DC, JT Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted This column is for assets solely held by your spouse or dependent child ş Example: Austhaut Frank Gout Securities Mega Corporation Common Stock (partial sale) of Transaction **PURCHASE** Type SALE **EXCHANGE** Check Box if Capital Gain Exceeded \$200 (MO/DAY/YR) Quarterly, Monthly, or Bi-weekly, if applicable 10-12-12 Date \$1,001-\$15,000 ➣ \$15.001-Œ \$50,000 \$50,001-O \$100,000 Amount of Transaction \$100,001-O \$250,000 \$250,001m \$500,000 \$500,001-П \$1,000,000 \$1,000,001-Ω \$5,000,000 \$5,000,001-I \$25,000,000 \$25,000,001-\$50,000,000 Over <u>\_</u> \$50,000,000 Over \$1,000,000\* X (Spouse/DC Asset)

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Name (L. Cheal) H. C. Mark the highest

close of the preceding calendar year exceeded \$10,000. "This column is for liabilities held solely by your spouse or dependent child. are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal

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	JT OC,		R		:		
Date	Creditor	Example: First Bank of Wilmington, DE	fred still married	8	a		
Date	Liability Incurred Mo/Year	May 1998		n 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(		
-	Type of Liability	Mortgage on 123 Main St., Dover, DE		20 hartage	C		
	\$10,001- \$15,000						
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-	Over \$50,000,000 <b>C</b> Spouse/DC Liability	L					
	Over \$1,000,000°		]			1	

#### SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

	Name
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### SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Evamplas	Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z		Z	None
Ехапірівъ.	Roycroft Corporation	Aug. 6-11	DC—Los Angeles—Cleveland	Υ	¥	Y	2 Days
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#### **SCHEDULE VIII—POSITIONS**

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza-

#### **SCHEDULE IX—AGREEMENTS**

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

_				
	·		Date	
			Parties To	
			Terms of Agreement	